

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 700168	RECEIPT DATE:	11 / 09 / 00
IA NUMBER:	PCT/ JP00 / 01510	IA FILING DATE:	03 / 13 / 00
FAMILY NAME:	KONDO	DELAY WAIVED (Y/N):	Y
GIVEN NAME:	TETSUJIRO	DEMAND RECEIVED (Y/N):	N
PRIORITY CLAIMED (Y/N):	Y	PRIORITY DATE:	03 / 12 / 99
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	N
ATTORNEY DOCKET NUMBER:	450101 02398	COUNTRY:	
CORRESPONDENCE NAME/ADDRESS:	CUSTOMER NUMBER:	000000	TELEPHONE 0000000000
			FAX

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STATE/COUNTRY: NY ZIP: 10151

EMAIL:

APPLICATION TITLES:

DATA PROCESSING APPARATUS DATA PROCESSING METHOD AND MEDIUM

TAB TO LAST POSITION,PUSH SEND



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Bib Data Sheet

<b>SERIAL NUMBER</b> 09/700,168	<b>FILING DATE</b> 11/09/2000 <b>RULE</b> -	<b>CLASS</b> 369	<b>GROUP ART UNIT</b> 2651	<b>ATTORNEY DOCKET NO.</b> 450101-02398
<b>APPLICANTS</b> Tetsujiro Kondo, Tokyo, JAPAN; Junichi Ishibashi, Saitama, JAPAN; <i>bl</i>				
<b>** CONTINUING DATA *****</b> <i>YES</i> THIS APPLICATION IS A 371 OF PCT/JP00/01510 03/13/2000 <i>bl</i>				
<b>** FOREIGN APPLICATIONS *****</b> <i>YES</i> <i>bl</i> JAPAN 11/66635 03/12/1999				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 12/06/2000</b> -				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <i>Prille</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 19	<b>TOTAL CLAIMS</b> 33
				<b>INDEPENDENT CLAIMS</b> 21
<b>ADDRESS</b> Williams S Frommer Frommer Lawrence & Haug 745 Fifth Avenue New York, NY 10151 <i>20999</i>				
<b>TITLE</b> Data processor, data processing method, and recorded medium				
<b>FILING FEE RECEIVED</b> 2534	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	